

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

2005 JUL -6 PM 1:21

In re patent application of:	)	MAIL STOP 16
Jean A. Chmielewski	)	
Serial No. 10/018,043	)	Our Reference: 7024-536
Filed May 21, 2002	)	
PHARMACEUTICAL MATERIALS	)	
AND METHODS FOR THEIR	)	
PREPARATION AND USE	)	June 30, 2005

REQUEST FOR REFUND OF ONE HALF OF NOTICE OF APPEAL FILING FEE

MAIL STOP 16  
Director of the US Patent and Trademark  
Office  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

On June 27, 2005, Applicants filed a Notice of Appeal in the above-referenced matter. Applicants inadvertently paid the large entity fee amount of \$500.00 for the filing fee instead of \$250.00. As Applicants are entitled to small entity status per 37 CFR 1.27(c), it is hereby respectfully requested that one-half (\$250.00) of the filing fee be credited to Deposit Account No. 23-3030, pursuant to 37 CFR 1.26.


I hereby certify this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to MAIL STOP 16, Director of the US Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313 on June 30, 2005.

Timothy N. Thomas  
Name of Registered Representative

Timothy N. Thomas  
Signature

June 30, 2005  
Date

BEST AVAILABLE COPY

By: 

Timothy N. Thomas

Reg. No. 35,714

Woodard, Emhardt, Moriarty, McNett  
& Henry LLP

Bank One Center/Tower

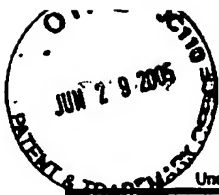
111 Monument Circle, Suite 3700

Indianapolis, IN 46204-5137

(317) 634-3456

#352194

BEST AVAILABLE COPY



AFS  
G.C.

WEIMH SB/31 (09-04)  
Approved for use through 07/31/2008. OMB 0651-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it contains a valid OMB control number.

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		<b>Docket Number (Optional)</b> 7024-536
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 [37 CFR 1.89(a)]		In re Application of Jean A. Chmielewski
June 27, 2005 Date	Application Number 10/018,043	Filed May 21, 2002
 Signature	For PHARMACEUTICAL MATERIALS AND METHODS FOR THEIR PREPARATION AND USE	
Timothy N. Thomas Typed or Printed Name	Art Unit 1623	Examiner Leigh C. Maier
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the Examiner.		
The fee for this Notice of Appeal is [37 CFR 41.20(b)(1)]:		\$ 500
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the		
<input type="checkbox"/> applicant/inventor.		 Signature
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number: 35,714		Timothy N. Thomas Typed or Printed Name
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration Number if acting under 37 CFR 1.34:		(317) 634-3458 Telephone Number
		June 27, 2005 Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required (see below*).		
<input checked="" type="checkbox"/> *Total of 1 forms are submitted.		

16/30/2005 DENMANU1 00000003 10018043

11 FC:1401

500.00 DP

TNT.bkp.351718

Page 1 of 1

Atty. Docket 7024-536

Refund Ref:  
08/16/2005

0030024561

Credit Card Refund Total: \$250.00  
Am Exp.: XXXXXXXXXXXX1029

Adjustment date: 08/16/2005 SDIRETH1  
06/30/2005 DENMANU1 00000003 10018043  
08/16/2005 SDIRETH1 00000007 10018043  
250.00 DP  
01 FC:2401